

County: Trempealeau
 TRI-COUNTY MEMORIAL HOSPITAL NURSING HOME
 18601 LINCOLN, P. O. BOX 65

Facility ID: 8850

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WHITEHALL 54773 Phone: (715) 538-4361
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? Yes
 Number of Beds Set Up and Staffed (12/31/01): 68
 Total Licensed Bed Capacity (12/31/01): 68
 Number of Residents on 12/31/01: 62

Ownership: Non-Profit Corporation
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? No
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 67

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	24.2
Supp. Home Care-Personal Care	No					1 - 4 Years	48.4
Supp. Home Care-Household Services	No	Developmental Disabilities	3.2	Under 65	1.6	More Than 4 Years	27.4
Day Services	No	Mental Illness (Org./Psy)	14.5	65 - 74	6.5		-----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	27.4		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	1.6	85 - 94	54.8	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.7	Full-Time Equivalent	
Congregate Meals	No	Cancer	3.2		-----	Nursing Staff per 100 Residents	
Home Delivered Meals	No	Fractures	9.7		100.0	(12/31/01)	
Other Meals	No	Cardiovascular	24.2	65 & Over	98.4	-----	
Transportation	No	Cerebrovascular	12.9		-----	RNs	6.7
Referral Service	No	Diabetes	3.2	Sex	%	LPNs	10.7
Other Services	No	Respiratory	4.8		-----	Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	22.6	Male	24.2	Aides, & Orderlies	
Mentally Ill	No		-----	Female	75.8		
Provide Day Programming for			100.0		-----		
Developmentally Disabled	No				100.0		

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi cal d (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)			
Int. Skilled Care	0	0.0	0	1	1.9	117	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	1	1.6
Skilled Care	0	0.0	0	52	96.3	100	0	0.0	0	6	75.0	130	0	0.0	0	0	0.0	0	58	93.5
Intermediate	---	---	---	1	1.9	83	0	0.0	0	2	25.0	115	0	0.0	0	0	0.0	0	3	4.8
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		54	100.0		0	0.0		8	100.0		0	0.0		0	0.0		62	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	0.0	88.7	11.3	62
Other Nursing Homes	24.1	Dressing	22.6	64.5	12.9	62
Acute Care Hospitals	75.9	Transferring	35.5	46.8	17.7	62
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	32.3	54.8	12.9	62
Rehabilitation Hospitals	0.0	Eating	79.0	12.9	8.1	62
Other Locations	0.0	*****				
Total Number of Admissions	29	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	0.0	Receiving Respiratory Care		11.3
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	46.8	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	6.1	Occ/Freq. Incontinent of Bowel	19.4	Receiving Suctioning		0.0
Other Nursing Homes	15.2			Receiving Ostomy Care		3.2
Acute Care Hospitals	3.0	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	3.2	Receiving Mechanically Altered Diets		37.1
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	75.8	With Pressure Sores	0.0	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	16.1	Medications		
(Including Deaths)	33			Receiving Psychoactive Drugs		45.2

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	98.5	88.1	1.12	84.6	1.16
Current Residents from In-County	95.2	83.9	1.13	77.0	1.24
Admissions from In-County, Still Residing	48.3	14.8	3.26	20.8	2.32
Admissions/Average Daily Census	43.3	202.6	0.21	128.9	0.34
Discharges/Average Daily Census	49.3	203.2	0.24	130.0	0.38
Discharges To Private Residence/Average Daily Census	3.0	106.2	0.03	52.8	0.06
Residents Receiving Skilled Care	95.2	92.9	1.02	85.3	1.12
Residents Aged 65 and Older	98.4	91.2	1.08	87.5	1.12
Title 19 (Medicaid) Funded Residents	87.1	66.3	1.31	68.7	1.27
Private Pay Funded Residents	12.9	22.9	0.56	22.0	0.59
Developmentally Disabled Residents	3.2	1.6	2.06	7.6	0.43
Mentally Ill Residents	14.5	31.3	0.46	33.8	0.43
General Medical Service Residents	22.6	20.4	1.11	19.4	1.16
Impaired ADL (Mean)*	39.7	49.9	0.79	49.3	0.81
Psychological Problems	45.2	53.6	0.84	51.9	0.87
Nursing Care Required (Mean)*	8.5	7.9	1.07	7.3	1.15